

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE
2008 JUL 18 PM 7-17
AM 10:28

COMMITTEE NAME (Must be same as on Statement of Organization)

Lou Oswald for House 27

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Lou Oswald

Political Party (if applicable)

R

Office Sought

Representative HD 27

District (if Senate or House)

27

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1790

0

0

0

6 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Mary T. Story
SIGNATURE OF PERSON FILING REPORT

563.556.5207
TELEPHONE

7/16/08
DATE SIGNED

I AM FILING A July 19, 2008 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

11/4/08

County & Local Committees, enter County in
which Election is held

Dubuque

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

751.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

875.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

1626.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1345.98

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

280.02

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

0

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

174.08

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Lou Oswald for House 27

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|---|--|-----------------|-----------------------------|
| 5/23/08 | ID# CK# | Sharon G. Finnin 1129 Hunters Ridge Dubuque, IA 52001 | None | \$ 100.00 | <input type="checkbox"/> |
| 5/23/08 | ID# CK# | Steve J. Mueller 2728 Asbury Rd Suite 320 Dubuque, IA 52001 | None | 100.00 | <input type="checkbox"/> |
| 6/11/08 | ID# CK# | Arnold Noyce Montamp 1050 Prince Phillip Dr. Dubuque, IA 52003 | None | 100.00 | <input type="checkbox"/> |
| 6/12/08 | ID# CK# | Juanita Oswald 11500 Natalie Dr. Dubuque, IA 52003 | Mother | 50.00 | <input type="checkbox"/> |
| 6/18/08 | ID# CK# | Richard / Mary Gregory 740 Tanglewood Ct. Dubuque, IA 52003 | None | 50.00 | <input type="checkbox"/> |
| 6/19/08 | ID# CK# | Kane Howe Appraisal Services 14858 W. Ridge Ln #8 Dubuque, IA 52003 | None | 25.00 | <input type="checkbox"/> |
| 6/28/08 | ID# CK# | Karl / Barbara Gilbertson 1609 Rainbow Dr. Cedar Falls, IA 50613 | None | 25.00 | <input type="checkbox"/> |
| 6/30/08 | ID# CK# | Werner Hellmer 137 1st Ave E P.O. Box 342 Dyersville, IA 52040 | None | 100.00 | <input type="checkbox"/> |
| 6/30/08 | ID# CK# | Martin / Nancy McNamer 1744 Creek Wood Dr. Dubuque, IA 52002 | None | 50.00 | <input type="checkbox"/> |
| 7/10/08 | ID# CK# | Wallace Brown 1494 Oak St. Dubuque, IA 52003 | None | 5.00 | <input type="checkbox"/> |

SUB-TOTAL

\$ 605.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
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COMMITTEE NAME (Must be same as on Statement of Organization)

Lou Oswald For House 27

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| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|---|--|-----------------|-----------------------------|
| 7/10/08 | ID# CK# | Larry Friedman 880 Locust St. Dubuque Iowa 52001 | None | \$ 10.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Kristine F. Oswald 1734 Bridge Ave. Davenport, IA 52803 | Sister | 10.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Erin Sedawasser 1734 Bridge Ave Davenport, IA 52803 | Niece | 10.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Louis Oswald II 1080 Nowata St. Dubuque, IA 52001 | Son | 5.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Danielle Oswald 3013 Woodland Ave. Apt 207 Des Moines, IA 50312 | Daughter | 10.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Rachel Oswald 3013 Woodland Ave. Apt 207 Des Moines, IA 50312 | Daughter | 10.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Joseph Oswald 1080 Nowata St. Dubuque IA 52001 | Son | 5.00 | <input type="checkbox"/> |
| 7/15/08 | ID# CK# | Rose Oswald 1080 Nowata St. Dubuque, IA 52001 | Wife | 10.00 | <input type="checkbox"/> |
| 7/16/08 | ID# CK# | James / Pauline White 295 Southgate Dr. Dubuque, IA 52003 | None | 50.00 | <input type="checkbox"/> |
| 7/16/08 | ID# CK# | Jacqueline Weitz 1001 Assisi Dr. Apt. 302 Dubuque, IA 52001 | None | 50.00 | <input type="checkbox"/> |

SUB-TOTAL

\$ 170.00

TOTAL (if last page of this schedule)

\$

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Page 2 of 3
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Lou Oswald for House 27

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND- RAISER INCOME |
|--------------------------------|---|---|--|--------------------|---------------------------------------|
| <i>7/16/08</i> | ID# CK# | <i>Robert Hanley 1003 Century Cir. Shop Dubuque, Iowa 52001</i> | <i>None</i> | <i>\$ 100.00</i> | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |

SUB-TOTAL

\$ 100.00

TOTAL (if last page of this schedule)

\$ 875.00

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Page 3 of 3
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| | |
|---|--|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)

Lou Oswald for House 27

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|---------------------------------------|---|--|---|--------------------|
| 5/23/08 | ID# CK# 1002 | Lou Oswald 1080 Nowata St Dubuque IA 52001 | Copy Works STAMPS - POSTAGE SIGNS - Lettering Victory Store - Signs | \$ 713.78 |
| 6/19/08 | ID# CK# 1003 | Lou Oswald 1080 Nowata St. Dubuque IA 52001 | US Post Office Stamps | 84.00 |
| 7/1/08 | ID# CK# 1004 | The Stevens Co 2728 Asbury Rd Dubuque IA 52001 | Typesetting Website revision | 190.00 |
| 7/9/08 | ID# CK# 1005 | Lou Oswald 1080 Nowata St Dubuque IA 52001 | 2 TRIPS TO DES MOINES 1) 5/20/08 Tour Capital 2) 6/26/08 EPIC Interview Total=796 miles @ .45/mile | 358.20 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 1345.98 |
| TOTAL (if last page of this schedule) | | | | \$ 1345.98 |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)

Lou Oswald for House 27

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

| DATE RECEIVED (MM/DD/YY) | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE * (if applicable) | DESCRIPTION OF IN KIND CONTRIBUTION | ESTIMATED FAIR MARKET VALUE | ✓ IF FOR FUND-RAISER CONTRIBUTION |
|---|---|---|---|-----------------------------------|---|
| 6/13/08 | Republican Party of IA 621 E 9th Des Moines, IA 50309 | NONE | Creative Leap Logo Design | \$ 100.00 | <input type="checkbox"/> |
| 6/26/08 | Lou Oswald 1080 Nowata St. Dubuque IA 52001 | Self | 2 trips to Des Moines, IA 796 miles @ .055/mile | 43.78 | <input type="checkbox"/> |
| 5/21/08 | Lou Oswald 1080 Nowata St Dubuque IA 52001 | Self | Campaigning around DBQ 20 miles @ .505/m | 10.10 | <input type="checkbox"/> |
| 5/28/08 | Lou Oswald 1080 Nowata St. Dubuque IA 52001 | Self | Door to Door with signs 20 miles @ .505/m | 10.10 | <input type="checkbox"/> |
| 6/05/08 | Lou Oswald 1080 Nowata St Dubuque IA 52001 | Self | Campaigning around DBQ 20 mi. @ .505/m | 10.10 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 174.08 | |
| TOTAL (if last page of this schedule) | | | | \$ 174.08 | |

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)